PTO/SB/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED – PART I (Column 1) (Column 2) SMALL ENTITY									OR	OTHER THAN SMALL ENTITY	
L	FOR NUMBER FILED				NUM	BER EXTRA	RATE	FEE	7	RATE	555
BASIC FEE (37 CFR 1.16(a))							1 1911		1	MIE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))					χ - I.		+	<u> </u>	OR	 	s <u>7/0</u>
INE	DEPENDENT CLA	JMS	1			/	X \$=	 	OR	x s=	
(37 CFR 1.16(b)) minus 3 =						<u> </u>		OR	x s=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ s <u> </u>		OR	+ 5=	
. 11	* If the difference in column 1 is less than zero, enter *0" in column 2.								OR	TOTAL	710
4	110/0, 0			IENDEC) – PART II					OTHE	R THAN
1	1		umn 1) LAIMS		(Column 2)	(Column 3)	SMALL	ENTITY	OR		ENTITY
AMENDMENT A	RE		MAINING FTER NDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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	Independent (37 CFR 1.16(b))		5	Minus	5	= /			OR	x s=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						=		OR	X \$=	
	[37]					FR 1.16(d))	+ s = TOTAL	ļ	OR	+ \$=	1
							ADD'L FEE		OR	TOTAL ADD'L FEE	0
	(Column 1) (Column 2) (Column 3)										
AMENDMENT B		REM. AF	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	Ŀ		Minus	••		x \$ =	•	OR	x s =	166
	Independent (37 CFR 1.16(b))			Minus	•••		x s =				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								OR	x s =	
							+ s = TOTAL ADD'L FEE		OR OR	+ \$ = TOTAL ADD'L FEE	
		(Colu	mn 1)		(Column 2)	(Column 3)	•			•	
MEN		REMA AF	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
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	Independent (37 CFR 1.16(b))	•		Minus	***	=			OR	X \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						x \$=		OR	x s =	
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	II the "Highest N	lumber P	reviously (Paid For	in column 2, write IN THIS SPACE i IN THIS SPACE is	- I Ab 20				•	

The 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Best Available Copy Application or Dock 1 Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 **OTHER THAN** CLAIMS AS FILED - PART I SMALL ENTITY SMALL ENTITY TYPE [OR (Column 2) (Column 1) FEE RATE RATE FEE TOTAL CLAIMS BASIC FEE 710.00 BASIC FEE 355.00 NUMBER EXTRA OR NUMBER FILED FOR X\$18= 216 X\$ 9= TOTAL CHARGEABLE CLAIMS minus 20= OR n XBO= minus 3 = X40= INDEPENDENT CLAIMS OR MULTIPLE DEPENDENT CLAIM PRESENT +270= +135= OΒ * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 3) (Column 2) (Column 1) ADDI-HIGHES' ADDI-CLAIMS NUMBER PRESENT **TIONAL** REMAINING RATE TIONAL RATE PREVIOUSLY **FXTRA** AFTER FEE AMENDMENT FEE PAID FOR AMENDATENT X\$18= X\$ 9= OA Minus Total 0 **X80=** Minus X40= independent OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 2). (Column 1) ADDI-HIGHEST ADDI-CLAIMS PRESENT NUMBER RATE TIONAL REMAINING TIONAL RATE 0 PREVIOUSLY **EXTRA** AFTER FEE FEE DMENT PAID FOR AMENDMENT X\$18= 0 X\$ 9= OR Minus Total X80= 6 86 Minus Independent X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= x135= TOTAL TOTAL 86 OR ADDIT. FEE ADDIT FEE (Column 3) (Column 2) (Column 1) HIGHEST ADDI-CLAIMS ADDI-NUMBER PRESENT TIONAL REMAINING RATE RATE TIONAL PREVIOUSLY **EXTRA** AFTER FEE ENDMENT FEE PAID FOR AMENDMENT X\$18= 20 X\$ 9= Minus OR Total X950=

If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus

" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

""If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Independent

OR

OR

OR

+270=

ADDIT. FEE

TOTAL

X40=

+135=

ADDIT. FEE

TOTAL